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*The Scottish Journal of Performance*

Volume 5, Issue 1; April 2018

ISSN: 2054-1953 (Print) / ISSN: 2054-1961 (Online)

Publication details: <http://www.scottishjournalofperformance.org>

**To cite this article:** Greer, S., 2018. Between care and self-care: dramaturgies of mindfulness in the work of the vacuum cleaner. *Scottish Journal of Performance*, 5(1): pp.25–47.

**To link to this article:** <http://doi.org/10.14439/sjop.2018.0501.04>



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## **Between care and self-care: dramaturgies of mindfulness in the work of the vacuum cleaner**

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DOI: 10.14439/sjop.2018.0501.04

Publication date: 6 April 2018

*Since 2009, the performance work of ‘art and activist collective of one’ James Leadbitter—better known as the vacuum cleaner—has repeatedly engaged with issues surrounding mental illness, ‘madness’ and mental health discrimination. This paper explores the relationship of that work to the discourse of ‘mindfulness’, a form of cognitive therapy centred on cultivating a non-judgmental and present-focused attentiveness to one’s own mental state. While an increasing body of evidence suggests the potential health benefits of mindfulness, its broader application has been challenged for invoking forms of self-critique which elide the social factors that undermine well-being.*

*In response, this paper examines how Leadbitter’s staging of the relationships between care and self-care might challenge the imperatives of individuated responsibility that are characteristic of neoliberal discourses. Rather than reproducing existing social relations, Leadbitter’s dramaturgies of mindfulness suggest how an attentiveness to one’s own wellbeing may be extended outwards as a response to others in prefigurative encounters which allow us to imagine and rehearse alternatives.*

**Keywords:** *mindfulness, mental health, neoliberalism, autobiographical performance, self-care.*

Since 2009, the performance work of 'art and activist collective of one' James Leadbitter—better known as the vacuum cleaner—has repeatedly engaged with issues surrounding mental illness, 'madness' and mental health discrimination. In the following paper, I briefly explore three of these projects: *Ship of Fools* (2011), *Mental* (2013–ongoing), and *Madlove: A Designer Asylum* (2014–ongoing) as negotiations with the increasingly significant concept of 'mindfulness' in its relationship to the politics of care and self-care in neoliberal times. Informed by Buddhist meditative practices, mindfulness techniques centred on an attentiveness to one's thoughts and feelings in the present moment have become the focus of considerable attention for health practitioners, researchers, and policy makers as a form of cognitive therapy shown to reduce many forms of psychological distress (Bishop et al., 2006). Through a process of non-judgmental reflection which 'accepts the present with moment without criticizing or judging' (Kang, Gruber and Gray, 2014, p.170), practitioners of mindfulness learn to become aware of automatic behavioural patterns that are detrimental to well-being and, in time, learn to disengage from them. At the core of mindfulness, then, is a process of reflexive attentiveness through which patterns of cognition and association are acknowledged but are no longer allowed to 'mindlessly' determine one's responses to the world (Langer, 2014, p.11).

While an increasing body of evidence suggests that mindfulness may be used to address conditions as diverse and serious as anxiety disorders, depression, parasuicidal behaviour, and chronic pain, its widespread application has also been challenged as inculcating forms of moralising self-surveillance which serve to obscure the social factors that undermine well-being (Barker, 2014; Reveley, 2016). This perspective is informed by an understanding of neoliberalism as not only involving the 'financialization of everything' (Harvey, 2005, p.33) but as a discourse characterised by what Michel Foucault theorised in his

lectures at the *Collège de France* as governmentality: a form of governance which arranges conditions ‘so that people, following their own self-interest *will do as they ought*’ (Scott, 1995, p.202, original emphasis). This dynamic is evident within neoliberal policy discourses in the UK and elsewhere around the world which:

implore individuals to become self-critical, to take personal responsibility for their lives, to adapt specific practices of self-regulation and improvement, and to embrace entrepreneurial and materialistic self-identities (Howard, 2007, p.5).

In this context, the discourse of mindfulness—centred on a belief that individuals may play an active role in managing their own psychological well-being—may be problematic insofar as it is highly compatible with neoliberalism’s preference for subjects willing to take ‘full responsibility for their life biography no matter how severe the constraints upon their action’ (Gill, 2008, p.436). On these terms, mindfulness may invoke a form of Foucaultian self-governance which ‘brings the level of required therapeutic surveillance down to an ever-smaller increment of time: moment to moment or breath to breath’ (Barker, 2014, p.172).

In response, this paper argues that Leadbitter’s practice suggests how mindfulness may be deployed in service of relational dynamics which extend beyond the imperatives of individuated responsibility that are characteristic of neoliberal discourses. While the model of the hyper-responsible self may promote the idea that ‘a good citizen cares for herself or himself best by evading or denying social relations’ (Rimke, 2000, p.61), Leadbitter’s engagement with mindfulness suggests how we may (re)negotiate the social structures through which

responsibility itself is conceived and understood. Rather than reaffirming the logic of autonomous personhood, a mindful dramaturgy—which is to say a mindful strategy for the composition of a performance and the social relations present within it—might serve politically transformative ends beyond those prescribed in neoliberalism by calling attention to the intersubjective encounters through which care for self or other becomes possible. As I will elaborate below, this involves an understanding of mindfulness as a praxis of encounter in which alternatives are not only available in the future, but may already exist in the here and now. Such an interpretation turns on a sense of Leadbitter's work as a form of prefigurative intervention which 'theorizes through action, through doing' (Maeckelbergh, 2011, p.3). First theorised by Carl Boggs (1977) as the embodiment of the goals of a movement in its social relations, decision-making structures and culture—and since deployed to describe many elements of the anti- and alter-globalisation movement—prefigurative activity proceeds by removing 'the temporal distinction between the struggle in the *present* and a goal in the *future*; instead, the struggle and the goal, the real and the ideal, become one in the present' (Maeckelbergh, 2011, p.4).

### **The vacuum cleaner**

Since 2003, Leadbitter's practice under the name of the vacuum cleaner—taken from an early performance intervention named *Cleaning Up After Capitalism* in which he dressed in a hi-vis vest to literally clean the public spaces of Wall Street and the City of London—has encompassed a range of direct actions, short films, art installations, and performances. This work has been informed by the artist's involvement in the alter-globalisation movement, a grassroots network of groups and individuals opposed to neoliberalism but which support global cooperation and interaction in matters of social and economic justice, and environmental protection (Steger and Wilson, 2012). Art

works include: *Put The Fun Between Your Legs* (2009), a giant banner originally installed on the outside of London's Arnolfini Studios listing climate activists' favourite forms of civil disobedience; a performance lecture on climate change titled *The Problem Is The Solution* (2008) presented at the National Review of Live Art; and a UK-wide series of street interventions and public acts of 'creative disobedience' as a founder member of the *Laboratory of Insurrectionary Imagination* (2004–2009)<sup>1</sup>. Following Leadbitter's experiences within the UK's mental healthcare system following a period of hospitalisation on an acute psychiatric ward in 2009, that practice expanded to directly address issues surrounding 'madness', mental health, and neurodiversity. Here, too, Leadbitter's work has involved a range of art forms and practices: bad jokes about mental illness in 2012's *Dam maD* (a contribution to Forest Fringe's Paper Stages project), visual gags appropriating public signage (as in a work rebranding a public bin with the words 'LOONY'), and pieces made for theatrical presentation as in *The Assessment* (2014), commissioned for Anxiety Festival.

These works can be located within an increasingly diverse field of autobiographical performance concerning mental health and neurodiversity by artists whose practices straddle theatre, comedy, one to one performance, and visual arts. Whether in the form of Demi Nandhra's ongoing Live Art-informed *I'm Sick and Tired of Being Sick and Tired* project concerning 'political depression and incomplete projects of liberation' (Nandhra, 2016), Kim Noble's exploration of suicidal impulses in the stand-up show *Kim Noble Will Die* (2009), or Bobby Baker's self-staging in *How to Live* (2004) as 'a mental health guru who has invented an 11-step programme for mental well-being' (Gardner, 2004), this body of practice is frequently concerned with the possibilities—and limits—of self-help and self-care. Such work also manifests a claim on the relationship between the personal and the political in which biographical details of

lived experience are brought to bear on larger questions of identity, wellness, and social welfare. I am particularly interested in Leadbitter's practice, though, for how his pursuit of 'solidarity and mutual care' (Leadbitter in Costa, 2013) suggests a resistance of neoliberalism's forms of compulsory individualism. That resistance is not premised on the refusal of individuality, but involves a mindful negotiation of where and when one's own agency may find its limit, and where it may be extended in support of others.

## Ship of Fools

This dynamic is apparent in the dramaturgy of Leadbitter's month-long 'self-initiated anti-section action' *Ship of Fools* (2011), discussed at length in his performance lecture 'I Went Mental And I All I Got Was This Lousy T-Shirt', first given at Nottingham Contemporary in 2013. Conscious of a downturn in his mental health and wanting to avoid returning to a secure ward as experienced during his previous period of illness, Leadbitter committed himself for a period of 28 days to his own self-made mental health institution—in actuality, his flat in Hackney, London. Through an online call out, Leadbitter sought creative residencies from 'both artists and non-artists alike in an attempt to find creativity in madness', with the only condition being that 'the residencies must involve the vacuum cleaner in some way - as material, as collaborator, as helper, as observer or as anything else that is creative and useful to both/all'. Participants would join Leadbitter in his flat—working with friend, artist, and activist Sophie Nathan—and accompany him while he attempted to make work, receiving in return 'a small honorary fee, space to work, computers, fast internet access, stills camera, video camera, screen printing facilities, cake and cups of tea, maybe even some lunch'<sup>2</sup>.

The larger function of the project—described simply by Leadbitter as 'to stop me from killing myself'—was served



by Leadbitter's ability to resist institutionalisation (drawing on friends and a mental health solicitor to avoid forcible removal from his own home under the UK's mental health law sectioning powers), to continue living in the public sphere and, crucially, to make work even as he experienced serious mental anguish. Though his collaborations with other artists and activists (including Sue Keen and Thom Scullion) during *Ship of Fools* took a range of forms, the most significant, recurring feature of that practice was its public orientation—that is, in actions which took place outside of the notional asylum space of Leadbitter's flat. In his lecture, Leadbitter describes on day five spray painting a sign reading 'Paradise Lost' around a letter box in hoardings surrounding the site of a former local café demolished by property developers: peering through the slot, passers-by could see the wild garden that had sprung up on the derelict land; on day eight, Leadbitter noticed letters missing from a sign outside of his local police station—appearing as METROPOLITAN LICE—and embarked on a later project of rebranding in which he changed the police logo on signs across London; on days 16 through 18, Leadbitter worked with artist Sue Keen to produce a representation of being in bed (where one can spend a lot of time when experiencing depression) that could be installed in a public space.

In his account of the project, Leadbitter also describes how recognition that he would be inviting strangers into his home led him to devise some rules for the space and the process. With Nathan, he produced a series of guidelines that appear as pragmatic, enabling strategies for making work and—at the same time—the first draft of a radical manifesto for mental health:

NO RESTRAINT

RESPECT LIMITS AND LIMITATIONS



ACTIVE ANTI-BURNOUT

NO VIOLENCE

BE GOOD TO YOURSELF AND OTHERS

TRUST (IF YOU CAN)

TELL IT LIKE IT IS

TAKE PLEASURE IN THE LITTLE THINGS

DON'T SUFFER IN SILENCE

QUESTION EVERYTHING

NEVER STOP TRYING / NEVER GIVE UP HOPE

NO SUDDEN MOVEMENTS

(reproduced from slide shown during 'I Went  
Mental And I All I Got Was This Lousy T-Shirt',  
2013 at 20 mins 12 secs)

While specific to Leadbitter's needs, these guidelines can be understood as resonant with the broader strategies of mindfulness, most clearly in promoting a present-focused attention to the detail of one's environment ('take pleasure in the little things') that accepts and recognises negative thoughts or emotions rather than attempting to deny them ('tell it like it is'), and which seeks to pursue contemplative

responses rather than sudden reactions ('question everything')<sup>3</sup>.

Leadbitter's account of the project also makes plain that these instructions described—or sought—mutually applicable conditions for action. The call for 'no restraint' on the imagination expressed in the first guideline, for example, also expressed the desire for no restraint in the literal, physical sense of being held down so that treatment might be administered (as experienced during his time on a locked ward); a desire, Leadbitter explained, which involved the agreement that he himself was not allowed to put anyone in a situation where they *had* to restrain him. Correspondingly, Leadbitter described the call for 'no sudden movements' as a way of managing impulsive action in moments of distress that might lead one to hurt oneself or another person. In this context, 'be good to yourself and others' describes a practice of continual negotiation, such as that being good to others is only possible if one also attempts to extend goodness to oneself. Consequently, 'tell it like it is' not only articulates the value of disclosure (that if someone asks you how are feeling and you are thinking of hurting yourself, then you need to say so) but serves as an invitation for one to take one's own pain seriously. This sensibility is mirrored in artist and theatre maker Bobby Baker's multimedia performance lecture *How to Live*. Informed by Baker's own experiences of depression and its treatment over more than a decade, the show is structured as a public seminar in which a patient—a single green pea—is guided through the techniques that will transform its life. While offering a tongue in cheek commentary on the universalising certainty of psychoanalysis, the show's life lessons are nonetheless rooted in an understanding of mindful cognitive therapy as a means of learning 'to watch yourself without getting caught up in an emotional or judgmental way' (Baker in Gardner, 2004).

Here too, the possibility of self-knowledge—as in Baker’s advice to retrace your steps to ‘find the niggle’ that is causing distress—is coupled with an assertion of the need for self-care. If you take time to walk in someone else’s shoes you must ‘never lose sight of your own shoes’, as empathy for others involves and requires empathy for oneself: ‘self-validate: your pain is real’ (Baker, 2004). Crucial here is how the invitation to ‘take the time to stand back from what you’re feeling, as much as you can’ (Leadbitter, 2013) contains within it recognition of one’s potential inability to adopt a mindful stance. As psychotherapist Susan Woods observes, ‘one needs to have a certain level of energy to be able to practice mindfulness. If the mind is being affected by profound states of depression or anxiety, there is not enough intentional energy to practice’ (Woods, 2016, p.329).

Oriented on contextual need rather than an imperative of self-surveillance—or a predetermined, normalising conception of mental wellness—Leadbitter’s practice suggests how mindfulness may be deployed against the conceit that one is always and merely ‘free’ to make choices about one’s welfare as a responsible subject. In this, the framing of mindful self-care as an intersubjective process (in *Ship of Fools*, as an informal contract) suggests how an overemphasis on the individual and underemphasis on the social—common to both orthodox medicine and mindfulness (Barker, 2014, p.174)—may be subject to ethical deliberation. Correspondingly, a mindful dramaturgy becomes the means of examining how an increased imperative to exercise responsible choices in our lives has not been accompanied by the resources ‘which would allow choices to be effectively made and realised’ (Dawson, 2013, p.57) as caring for oneself may require, for example, the ability to work flexibly, or perhaps not work at all. Perhaps more importantly, it draws attention to how such imperatives may constitute a particular ethical violence towards neurodivergent persons or others for whom

‘choice’ often or always involves others, as well as—more broadly—how neoliberal claims on autonomy may involve a denial of the social conditions and relations which underwrite them.

## Mental

Though grounded in his own lived experience of mental illness, an important feature of Leadbitter’s engagement with mindfulness is that it does not present self-knowledge as self-mastery. Rather than reinvigorating the individual duty of ‘assembl[ing] a self-identity and biography that reflects a life of one’s own choosing’ (Brown and Baker, 2012, p.12), it understands that claims on mastery may involve an appeal to forms of institutional authority oriented on (punitive) control rather than (reparative) care. This dynamic is apparent in Leadbitter’s following work *Mental* (2012–3) which emerged from a year spent working with film-maker Chris Atkins exploring the black market of personal data, with Atkins going undercover to purchase personal and confidential information relating to health, financial, and police records from private detectives<sup>4</sup>. In the resulting documentary broadcast as part of Channel 4’s Dispatches documentary series, Leadbitter was presented with a record of his past and ongoing benefit claims, his bank account numbers, and records of appointments at his GP surgery, one which had taken place only days before the beginning of *Ship of Fools*. Concerned for the other kinds of information that might exist about him, Leadbitter then worked with his producer to make freedom of information requests under the Data Protection Act—the overarching framework through which UK citizens can seek access to state held records on their lives and person. This six-month process produced around eight thousand pages of information: his full psychiatric history, his partly redacted police intelligence file relating to his activist work, details of time spent homeless and records of corporate injunctions taken out following various direct actions. This material

formed the basis for *Mental*, initially staged in his own bedroom and later presented in other private homes or performance venues temporarily converted into intimate, domestic spaces. In the following section I draw on first person accounts from critics and other audience members of the performance as staged during the SICK! Festival of Contemporary Performance Art in Brighton and as part of the Scottish Mental Health Arts and Film Festival in Glasgow in 2013, as well as Leadbitter's own account of the performance in interview (Hughes and Parry, 2015; Costa, 2013; Hoggett, 2013).

In the show's first 'chapter', Leadbitter recounts his early encounters with the mental healthcare system through a trail of formal records naming hospitals, hostels and temporary accommodation which stands at impersonal distance from the person whose experiences they describe. At age 19, Leadbitter is experiencing multiple mental health conditions: depression, anxiety, panic attacks, but no one tells him what he is being medicated for—borderline personality disorder. In the second sequence, Leadbitter describes withdrawing from psychiatric treatment and becoming more heavily involved in activism and direct action. Documents and stories trace his involvement with activist group Clandestine Insurgent Rebel Clown Army, his participation in protests against Starbucks and the G8, and his growing consciousness of the attention of police intelligence officers (and their infiltration of his own network of friends and fellow activists). In the third movement, the moment tips towards the (then) present of the work's creation and a health crisis which led to a lengthy period of hospitalisation. He turns out a large cardboard box onto his bed containing countless boxes of the drugs prescribed to him over the years: psychotropics, mood stabilisers and drugs to counteract their side effects. In the final sequence—echoing *Ship of Fools*' act of self-commitment—Leadbitter writes his own Mental Health Act and sections himself under section 1.

Throughout *Mental*, moments of institutional cruelty or dispassion are married with memories of acts of kindness from friends and strangers, some of whom overstep boundaries of professional conduct to help (a nurse who takes him home and rolls him a joint, and allows him to sleep on her sofa). As theatre critic Maddy Costa observes, 'the contrast of that care with the official language of the documents is sharp. Here, *Leadbitter* is a number, a sequence of actions, a list of medication' (Costa, 2013). If the intertwining of these registers allows *Leadbitter* to describe and simultaneously resist a regime in which you become 'the accumulation of your diagnosis, you become the accumulation of the medication that you're on, you become the accumulation of how the police refer to you' (*Leadbitter* in Hughes and Parry, 2015), it does this by extending care to both the performer and his audience. That extension of care, though, marks the opening of an uncertain and potentially precarious relationship in which the terms of possible responsibility for self or other cannot be conclusively determined in advance of their enactment. *Leadbitter's* role as sole performer in control of the work means that the desire to make challenging and potentially distressing material accessible to an audience is held in tension with a need to safeguard his own mental health, so far as that is possible. Though mindfulness practices may be oriented on the discovery of 'a very different relationship to what has previously been perceived as anxiety provoking or overwhelming' (Woods, 2016, p.325), the work invites recognition of how such a process should not be confused with a linear narrative of recovery from either trauma or ill health.

*Leadbitter* suggests:

In many respects, this is the most traditional piece of art I have ever made, but I'm okay with that, because some of the stories that I have to tell

can be very, very difficult to hear. So, creating a nice convivial environment where everybody gets in my bedroom, gets under the duvet with me and gets a cup of tea, and then I tell the stories... (Leadbitter, 2013).

Though this frame involves a conscious theatricalisation of the domestic sphere as one of safety and comfort, it involves something other than naturalistic illusion and, moreover, owes its efficacy to the fact that:

It's not pretend. I'm not pretending. It still has the transformative act in it. Yes, it has narrative in it, yes, people sit and watch something, yes, I'm telling a story but I think it's closer to a piece of documentary film than a piece of theatre ... If when I'm doing it, I don't feel anything, then that's what happens. Sometimes I get very, very distressed and that's what happens (quoted in Hughes and Parry, 2015).

If mindfulness can be ascribed a dramaturgy, it is one in which whatever happens, happens—and in which an ethical encounter may first only involve the work of paying attention to that instance, and taking its contents seriously enough to find them consequential. In this sense, Leadbitter's choices of self-staging also call attention to the limits of a performative mastery of the self, sometimes assumed for solo autobiographical performance as a mode uniquely expressive of the human capacity for self-fashioning.

In any case, if the stories are hard to hear then performing them is also difficult; here, too, the gesture of care is bound up with the necessity of self-care. As Costa recounts:



Many audience-members have commented that they could do with sharing the cup of tea after *Mental*, rather than before, to decompress after inhabiting such an intense space; Leadbitter understands that need, but asks his audience to leave directly after the show, because he too needs space to look after himself and decompress (Costa, 2013).

While the performance of self-sectioning—and the claim on an ability to design one's own treatment—which closes *Mental* 'contrasts the passivity of being a patient with the exhilaration of taking direct action' (O'Donoghue, 2014), it does so by asserting the ongoing and constitutive vulnerability of the performer and his audience as both the field and condition of ethical encounter.

## **Madlove**

Common to *Ship of Fools* and *Mental* is a sense of how 'managing at home' (the desired outcome of 'care in the community' health policies) might not merely involve reproducing the controlled conditions of an acute ward in a domestic setting, but support people with mental illness to seek assistance without isolating themselves (or being forcefully isolated) from broader social and creative communities of support. At the same time, those works articulate that the negotiation of care and self-care involves a range of different potential structures of power: between a patient and their doctor, between an individual and the state, and between an artist and their audience. An attempt to acknowledge and transform (rather than merely refuse) this dynamic underwrites Leadbitter's ongoing *Madlove* 'designer asylum' project, a collaboration with artist Hannah Hull centred on the creation of an experimental, alternative asylum space that might offer 'a positive space to experience mental distress ... and enlightenment', and counter 'the popular myth that mental illness is dangerous and scary'

(Leadbitter and Hull, 2014). The project began as a series of workshops spanning festivals, arts venues and secure psychiatric hospitals, and centred on questions such as: 'what does good mental health care feel like?', and 'what does good mental health look, taste, sound, touch and feel like to touch?'. The project has brought together mental health care professionals, academics and artists, and people with and without experience of mental illness to reimagine the concept of the asylum as a whole. As one workshop attendee observed, this has not merely involved asking 'what colour we'd like to repaint the healthcare system', but inviting its participants to 'redefine the actual blueprint of what mental health care could be' (Delaney, 2014).

While both *Ship of Fools* and *Madlove* are sharply attentive to the lived experience of spending time in mental health hospitals, they also invite their audiences and participants to think about mental illness—and the trope of the asylum—in terms of social and cultural structures rather than buildings alone, and to do so in terms of what Leadbitter and Hull have described as: a project of 'mutual care', that might allow madness 'to be experienced in a less painful way' (Leadbitter and Hull, 2014). Such a project pursues the destigmatisation of mental ill health while querying the forms of assistance that we might offer to ourselves and each other. That query is not paranoid—always fearful of hidden structures of power—but respects how such assistance may necessarily take the form of a negotiation between self- and other-oriented care. It also asserts that care may be possible without invoking the kinds of normalising and objectifying judgments which characterise many self-help regimes<sup>5</sup>. It is, in short, a process which proceeds by perpetually asking 'who are you?' and 'what do you need?' without any expectation of a full and final answer (see Butler, 2005, p.43).

In later development of *Madlove*, Leadbitter and Hull have

worked with designers Benjamin Koslowski and James Christian alongside illustrator Rosie Cunningham to prototype concepts and share findings from the workshops, leading to a contribution to Wellcome Collection's 2016–7 exhibition *Bedlam: the asylum and beyond*, involving an installation of material from the research process, and a figurative scale model of the designer asylum itself. At the end of the exhibition, visitors were invited to reflect on their own care, and how they support those around them, by making a 'Madlove Pocket Asylum'—a wallet-sized leaflet asking three questions:

How could you change your environment to better support your mental health?

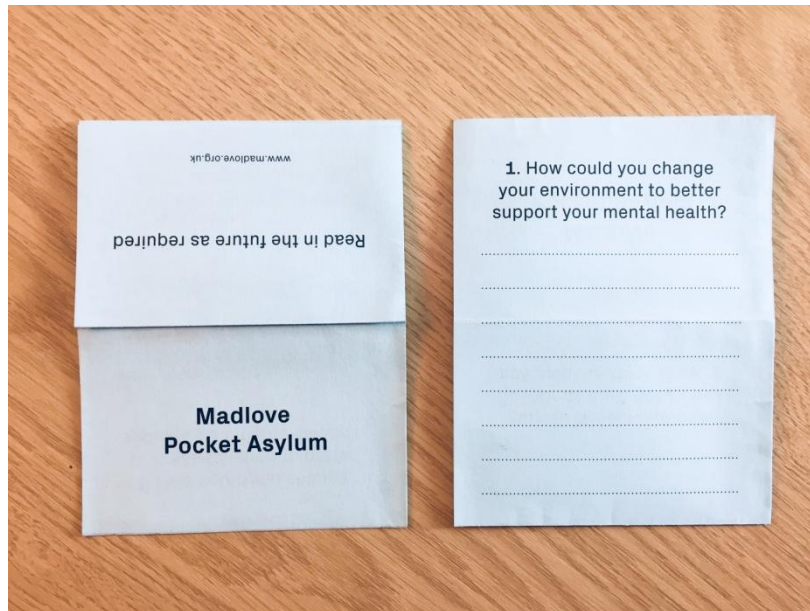
How would you support a friend/relative/co-worker if they were struggling with their mental health?

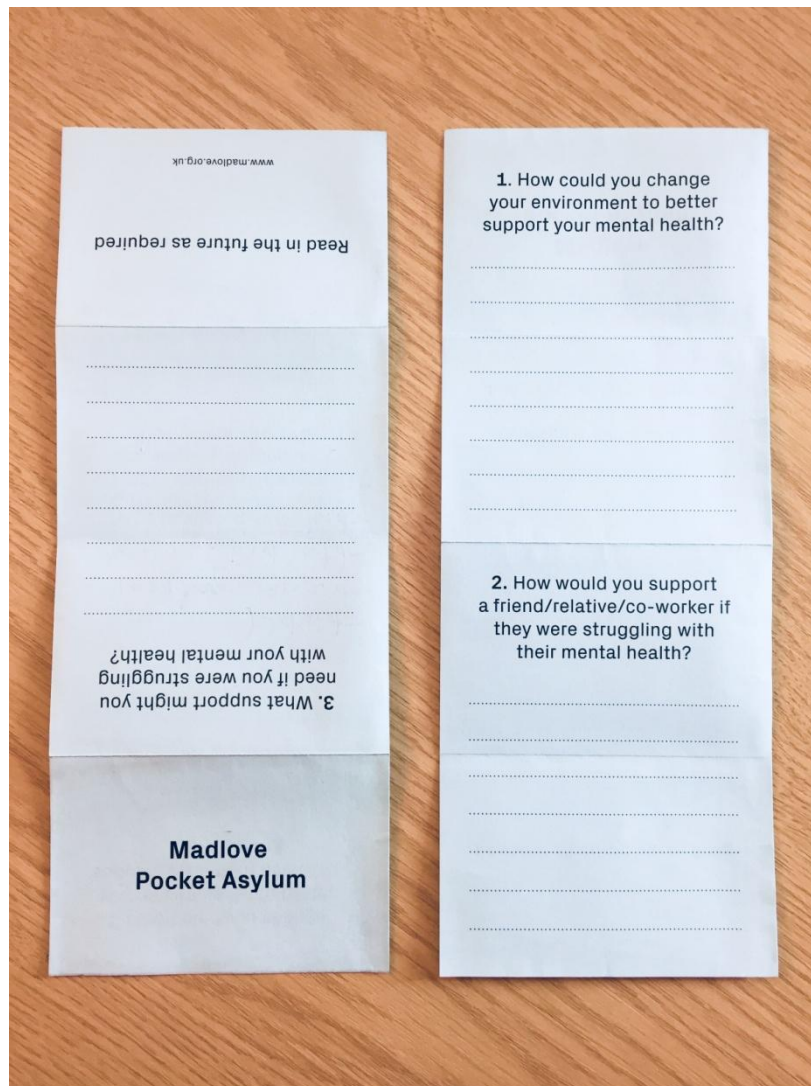
What support might you need if you were struggling with your mental health?

(Leadbitter, J. and Hull, H., 2014)

Here, too, one may detect strategies of mindfulness in the appeal to consider how one might attend to one's own wellness while, at the same time, reflecting on how that attentiveness may be extended outwards as a response to others. That reflection is not oriented on the pursuit of conclusive answers premised on the individual 'as a free but ultimately responsible agent' (Gergen, 2009, p.79), but attends to the dynamics which might emerge between and among individuals. In doing so, it manifests an attempt to think and practice forms of care apart from those most readily compatible with neoliberal priorities—that is, forms

of care which acknowledge that our accountability to one another cannot be conclusively determined through an appeal to the ideal of autonomous personhood.





## Conclusion

While neoliberalism may be closely associated with practices of self-governance, any analysis that assumes practices of subjectification are inherently problematic may act to secure neoliberalism as a totalising regime in which ‘any response to it ... tightens its colonization of emotional life’ (Cook, 2016, p.152). In each of the performance works considered here, emotional life is given its own credence such that the attentiveness borne of mindfulness points towards the potential decolonisation of dominant logics for individuated responsibility. By deferring a demand for self-governance in preference for exchanges in which relative

and shifting claims on agency and autonomy are acknowledged and given credence, Leadbitter's work points towards the potential of vulnerability as an enabling and even transformative political affect. In making this claim, I am wary of valorising vulnerability as a politically desirable state: at the least, we must remain critically conscious of the relationship between the forms of exposure which may be constitutive of subjectivity, and those which are the product of inequitable social conditions, ill health, or the pathologisation of neurodiversity. Nevertheless, in its framing of care as a field of prefigurative encounter rather than a fixed relationship of power, Leadbitter's practice suggests how a mindful dramaturgy might allow alternatives to the dominant, individuating logics of neoliberalism to be imagined, rehearsed, and sustained.

## Notes

1. For documentation of the work of the *Laboratory of Insurrectionary Imagination*, see <http://labofii.net/> [Accessed 10 November 2017].
2. For the original call-out for *Ship of Fools*, see: [http://www.thevacuumcleaner.co.uk/wp-content/uploads/2012/02/sof\\_postercallout.pdf](http://www.thevacuumcleaner.co.uk/wp-content/uploads/2012/02/sof_postercallout.pdf) [Accessed 24 July 2017].
3. For an overview of mindfulness strategies, see Rebecca Crane (2008).
4. See 'Dispatches: Watching the Detectives', originally broadcast Channel 4, Spring 2012. <http://www.thevacuumcleaner.co.uk/watchingthedetectives> [Accessed 24 July 2017].
5. For discussion of this tendency, see Brigid Philip's (2009) analysis of David Burns' 'clinically proven, drug free treatment for depression' described in his book, *Feeling Good: The New Mood Therapy* (1999).

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